Quantity Purchase Agreement With The State Of Indiana

Vendor Remit to:

2000

WRIGHT WAYNURSING INC/NATION W

P O BOX 260775

CORPES CRISTI TX 78426

Qty Purchase Agreement QPA Number 00000000000000000000009697

ASA5-5-41 (RFP 4-86)

Requisition Nbr.: Effective Date: **Expiration Date:**

08/15/2004 08/14/2005

Agency Number:

Facility:

All State Agency

Vendor Federal ID: 352127129 Vendor Telephone Nbr: 765/258-3580--Name Of Contact Pers: Tina Laughner FAX Number: 765/258-3590--

Name and Address of Vendor:

WRIGHT WAYNURSING INC/NATION W Cntct: Tina Laughner

4727 N. CO. RD, 300 E. Frankfort IN 46041

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity

Article and Description

Unit Price

Page

1 of 1

This is an award of a Quantity Purchase Agreement for Nursing Services for a period of one year to begin August 15, 2004 and end August 14, 2005 or one year from date of last signature whichever is later.

Instructions for use of this contract can be accessed at www.in.gov/idoa/proc and click on the following:

- 1. Quantity Purchase Agreements
- 2. Instructions for Nursing Contracts

QPA can be mutually renewed yearly for three additional years.

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities are estimates and could be more or less. The awarded vendor must maintain, at a minimum, the following information and be capable of supplying a report within one week of a request by the State:

- 1. Quantity and Type of Products, including any options, purchased by any State Agency and/or Political Subdivision, separated by each.
- 2. Total Dollar value of purchases made, separated by State Agency and/or Political Subdivision

0.00 HUR00000000100011014 Nursing Services/Wright Way

0.0000

The following UN/CEFACT Unit of Measure Common Codes are used in this document: HUR Hour

Signature of Purchasing Officer

Typed Name

Teres

Date Signed

Signature Of Approval

Office Of the State Attorney General

Typed Name

Please See Contract for Signature Signed by Susan W, Gard, 08/25/04 for Stephen Carter, Attorney General

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Indiana Department Of Administration

Procurement Division

402 West Washington Street, Rm W468 Indianapolis, Indiana 46204

Telephone: (317) 232-3053

State Form 9955(R9/8-02)-Electronic Version-Approved by State Board Of Accounts, 2002

Pricing for All Districts

Position	1 st Shift rate per hour	2 nd Shift rate per hour	3 rd Shift rate per hour	Overtime rate per hour	Holiday rate per hour
Dental Assistant	\$21.00	\$22.00	\$24.00	X1.5	X1.5
Behavioral Clinician	\$36.00	\$38.00	\$40.00	X1.5	X1.5
LPN	\$32.50	\$33.50	\$34.00	X1.5	X1.5
RN	\$43.00	\$43.75	\$44.75	X1.5	X1.5
Charge Nurse	\$42.50	\$43.50	\$44.00	X1.5	X1.5
Certified Nurse Aide	\$20.00	\$22.50	\$23.50	X1.5	X1.5
Qualified Medication Aide	\$22.00	\$22.50	\$23.50	X1.5	X1.5

All Inclusive Pricing – All Districts

Staff	Rate Per Hour		
Dental			
Assistant	\$36.00		
Behavioral	\$60.00		
Clinician			
LPN	\$51.00		
	ec7 40		
RN	\$67.13		
Charge Nurse	\$66.00		
Charge Nuise	ψ00.00		
Certified Nurse	\$35.25		
Aide			
Qualified	\$35.25		
Medication			
Aide			